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PTO/SB/21 (08-00)

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| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) |                               | Application Number     | 08/897,390            |
|   |                               | Filing Date            | July 21, 1997         |
|   |                               | First Named Inventor   | LA VAIL, MATTHEW      |
|   |                               | Group Art Unit         | 1647                  |
|   |                               | Examiner Name          | HAYES, ROBERT CLINTON |
| Total Number of Pages in This Submission  | 30 + 9 Exhibits +5 References | Attorney Docket Number | UCAL-250CON4          |

| ENCLOSURES (check all that apply)  |   |  |
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| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                                   |
|--|-----------------------------------|
| Firm or Individual Name                    | PAULA A. BORDEN (REG. NO. 42,344) |
| Signature                                  |                                   |
| Date                                       | July 9, 2002                      |

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| <div style="border: 1px solid black; border-radius: 50%; width: 100px; height: 100px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: 0.8em;">OFFICE OF THE COMMISSIONER OF PATENTS AND TRADEMARKS</div> <div style="text-align: center;">JUL 15 2002</div> </div> <p><i>Patent fees are subject to annual revision.</i></p>   |                       |                       |                       | Application Number  |                       | 08/897,390            |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
|  |                       |                       |                       | Filing Date   |                       | July 27, 1997         |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
|  |                       |                       |                       | First Named Inventor  |                       | LAVAIL, MATTHEW M.    |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
|  |                       |                       |                       | Examiner Name   |                       | HAYES, ROBERT CLINTON |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
|  |                       |                       |                       | Group Art Unit  |                       | 1647                  |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| <div style="display: flex; justify-content: space-between;"> <span>AMOUNT OF PAYMENT</span> <span>(\$ 828.00)</span> </div>  |                       |                       |                       | Attorney Docket No.   |                       | UCAL-250CON4          |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| METHOD OF PAYMENT  |                       |                       |                       | FEE CALCULATION (continued)   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit overpayments to:</p> <p>Deposit Account Number 50-0815</p> <p>Deposit Account Name Bozicevic, Field &amp; Francis LLP</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>   |                       |                       |                       | <p>3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examination action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td>400.00</td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td>180.00</td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="5">Other fee (specify) Terminal Disclaimer</td><td>110.00</td></tr> <tr> <td colspan="4" style="text-align: right; font-weight: bold;">SUBTOTAL (3) (\$ 690.00)</td> <td colspan="2"></td> </tr> </tbody> </table> |                       | Fee Code              | Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid   | 105 | 130                       | 205 | 65                 | Surcharge - late filing fee or oath |                    | 127 | 50  | 227 | 25                    | Surcharge - late provisional filing fee or cover sheet |                       | 139                   | 130             | 139      | 130              | Non-English specification |     | 147 | 2,520                  | 147 | 2,520              | For filing a request for <i>ex parte</i> reexamination |     | 112 | 920*                              | 112 | 920*                   | Requesting publication of SIR prior to Examination action |              | 113 | 1,840*                                | 113 | 1,840* | Requesting publication of SIR after Examiner action |     | 115 | 110  | 215 | 55  | Extension for reply within first month |     | 116 | 400  | 216 | 200             | Extension for reply within second month | 400.00 | 117 | 920 | 217    | 460 | Extension for reply within third month |  | 118 | 1,440 | 218 | 720 | Extension for reply within fourth month |  | 128 | 1,960 | 228 | 980 | Extension for reply within fifth month |  | 119 | 320 | 219 | 160 | Notice of Appeal |  | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |  | 121 | 280 | 221 | 140 | Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  | 143 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | 180.00 | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 740 | 246 | 370 | For each additional invention to be examined (37 CFR § 1.129(a)) |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  | Other fee (specify) Terminal Disclaimer |  |  |  |  | 110.00 | SUBTOTAL (3) (\$ 690.00) |  |  |  |  |  |
| Fee Code   | Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description       | Fee Paid  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 105  | 130                   | 205                   | 65                    | Surcharge - late filing fee or oath   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 127  | 50                    | 227                   | 25                    | Surcharge - late provisional filing fee or cover sheet  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 139  | 130                   | 139                   | 130                   | Non-English specification   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 147  | 2,520                 | 147                   | 2,520                 | For filing a request for <i>ex parte</i> reexamination  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 112  | 920*                  | 112                   | 920*                  | Requesting publication of SIR prior to Examination action   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 113  | 1,840*                | 113                   | 1,840*                | Requesting publication of SIR after Examiner action   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 115  | 110                   | 215                   | 55                    | Extension for reply within first month  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 116  | 400                   | 216                   | 200                   | Extension for reply within second month   | 400.00                |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 117  | 920                   | 217                   | 460                   | Extension for reply within third month  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 118  | 1,440                 | 218                   | 720                   | Extension for reply within fourth month   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 128  | 1,960                 | 228                   | 980                   | Extension for reply within fifth month  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 119  | 320                   | 219                   | 160                   | Notice of Appeal  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 120  | 320                   | 220                   | 160                   | Filing a brief in support of an appeal  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 121  | 280                   | 221                   | 140                   | Request for oral hearing  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 138  | 1,510                 | 138                   | 1,510                 | Petition to institute a public use proceeding   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 140  | 110                   | 240                   | 55                    | Petition to revive - unavoidable  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 141  | 1,280                 | 241                   | 640                   | Petition to revive - unintentional  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 142  | 1,280                 | 242                   | 640                   | Utility issue fee (or reissue)  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 143  | 460                   | 243                   | 230                   | Design issue fee  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 144  | 620                   | 244                   | 310                   | Plant issue fee   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 122  | 130                   | 122                   | 130                   | Petitions to the Commissioner   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 123  | 50                    | 123                   | 50                    | Processing fee under 37 CFR 1.17(q)   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 126  | 180                   | 126                   | 180                   | Submission of Information Disclosure Stmt   | 180.00                |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 581  | 40                    | 581                   | 40                    | Recording each patent assignment per property (times number of properties)  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 146  | 740                   | 246                   | 370                   | For each additional invention to be examined (37 CFR § 1.129(a))  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 149  | 740                   | 249                   | 370                   | For each additional invention to be examined (37 CFR § 1.129(b))  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 179  | 740                   | 279                   | 370                   | Request for Continued Examination (RCE)   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 169  | 900                   | 169                   | 900                   | Request for expedited examination of a design application   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| Other fee (specify) Terminal Disclaimer  |                       |                       |                       |   | 110.00                |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| SUBTOTAL (3) (\$ 690.00)   |                       |                       |                       |   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| FEE CALCULATION  |                       |                       |                       |   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| <p>2. BASIC FILING FEE</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td></td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="5" style="text-align: right; font-weight: bold;">SUBTOTAL (1)</td> <td>0.00</td> </tr> </tbody> </table>  |                       |                       |                       | Large Entity Fee Code   | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description       | Fee Paid        | 101        | 740 | 201                       | 370 | Utility filing fee |                                     | 106                | 330 | 206 | 165 | Design filing fee     |  | 107                   | 510                   | 207             | 255      | Plant filing fee |                           | 108 | 740 | 208                    | 370 | Reissue filing fee |  | 114 | 160 | 214                               | 80  | Provisional filing fee |   | SUBTOTAL (1) |     |                                       |     |        | 0.00  |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| Large Entity Fee Code  | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description   | Fee Paid              |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 101  | 740                   | 201                   | 370                   | Utility filing fee  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 106  | 330                   | 206                   | 165                   | Design filing fee   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 107  | 510                   | 207                   | 255                   | Plant filing fee  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 108  | 740                   | 208                   | 370                   | Reissue filing fee  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 114  | 160                   | 214                   | 80                    | Provisional filing fee  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| SUBTOTAL (1)   |                       |                       |                       |   | 0.00                  |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| <p>1. EXTRA CLAIM FEES</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>41 - 38** = 3 x</td> <td></td> <td>18 = 54.00</td> <td></td> </tr> <tr> <td>Indep. Claims 6-5** = 1 x</td> <td></td> <td>84 = 84.00</td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td>=</td> <td></td> </tr> </tbody> </table><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="5" style="text-align: right; font-weight: bold;">SUBTOTAL (2) \$</td> <td>138.00</td> </tr> </tbody> </table> |                       |                       |                       | Total Claims  | Extra Claims          | Fee from below        | Fee Paid              | 41 - 38** = 3 x       |                 | 18 = 54.00 |     | Indep. Claims 6-5** = 1 x |     | 84 = 84.00         |                                     | Multiple Dependent |     | =   |     | Large Entity Fee Code | Large Entity Fee (\$)                                  | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description | Fee Paid | 103              | 18                        | 203 | 9   | Claims in excess of 20 |     | 102                | 84   | 202 | 42  | Independent claims in excess of 3 |     | 104                    | 280   | 204          | 140 | Multiple dependent claim, if not paid |     | 109    | 84  | 209 | 42  | ** Reissue independent claims over original patent |     | 110 | 18                                     | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |     | SUBTOTAL (2) \$ |   |        |     |     | 138.00 |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| Total Claims   | Extra Claims          | Fee from below        | Fee Paid              |   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 41 - 38** = 3 x  |                       | 18 = 54.00            |                       |   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| Indep. Claims 6-5** = 1 x  |                       | 84 = 84.00            |                       |   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| Multiple Dependent   |                       | =                     |                       |   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| Large Entity Fee Code  | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description   | Fee Paid              |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 103  | 18                    | 203                   | 9                     | Claims in excess of 20  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 102  | 84                    | 202                   | 42                    | Independent claims in excess of 3   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 104  | 280                   | 204                   | 140                   | Multiple dependent claim, if not paid   |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 109  | 84                    | 209                   | 42                    | ** Reissue independent claims over original patent  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| 110  | 18                    | 210                   | 9                     | ** Reissue claims in excess of 20 and over original patent  |                       |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |
| SUBTOTAL (2) \$  |                       |                       |                       |   | 138.00                |                       |                       |                       |                 |            |     |                           |     |                    |                                     |                    |     |     |     |                       |  |                       |                       |                 |          |                  |                           |     |     |                        |     |                    |  |     |     |                                   |     |                        |   |              |     |                                       |     |        |   |     |     |  |     |     |  |     |     |  |     |                 |   |        |     |     |        |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |        |     |    |     |    |  |  |     |     |     |     |  |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |   |  |  |  |  |        |                          |  |  |  |  |  |

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|-------------------|---|-----------------------------------|------------|-----------|----------------|
| Name (Print/Type) | Paula A. Borden   | Registration No. (Attorney/Agent) | 42,344     | Telephone | (650) 327-3400 |
| Signature         |  | Date                              | 07/09/2002 |           |                |

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| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:<br>Office of Initial Patent Examination, Commissioner for Patents, Washington, D.C. 20231. |                 |   |                       |
| Typed or Printed Name  | Cindy Kim Hoang |   |                       |
| Signature  |                 | Date  | July 9, 2002          |
| <b>REQUEST FOR<br/>CORRECTED FILING<br/>RECEIPT</b><br><br>Address to:<br><br>Commissioner for Patents<br>Washington, D.C. 20231   |                 | Attorney Docket   | UCAL-250CON4          |
|  |                 | Applicant   | LAVAIL, MATTHEW M.    |
|  |                 | Serial Number   | 08/897,390            |
|  |                 | Filing Date   | July 27, 1997         |
|  |                 | Group Art Unit  | 1647                  |
|  |                 | Examiner Name   | HAYES, ROBERT CLINTON |
|  |                 | Title: "PREVENTION OF RETINAL INJURY AND<br>DEGENERATION BY SPECIFIC FACTORS" |                       |

Sir:

A filing receipt for the above-identified patent application has been issued by the U.S. Patent and Trademark Office (copy attached) and has been found to contain the following error(s):

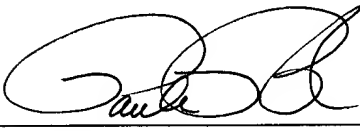
- (1) Please correct the Applicants as indicated on the application and declaration to add --Roy H. Steinberg and George D. Yancopoulos--
- (2) Please also add the priority information to read --This application claims benefit from USSN 08/334,859 filed November 4, 1994 and issued as U.S. Patent No. 5,667,968, which is a continuation of USSN 07/836,090 filed February 14, 1992, which is a continuation-in-part of USSN 07/691,612 filed April 25, 1991, which is a continuation-in-part of USSN 07/570,657 filed August 20, 1990 and issued as U.S. Patent No. 5,229,500, which is a continuation-in-part of USSN 07/400,591 filed on August 30, 1989 and issued as U.S. Patent No. 5,180,820--.

a14

If for any reason a fee is found to be necessary, the Commissioner is authorized to charge such fee to  
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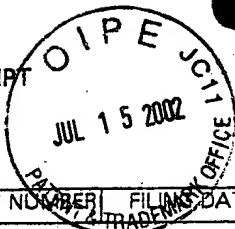
Respectfully submitted,  
BOZICEVIC, FIELD & FRANCIS LLP

Date: July 9, 2002

By:   
Paula A. Borden  
Registration No. 42,344

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| 08/897,390         | 07/21/97    | 1801         | \$1,326.00 REG-32 |                     | 6     | 38     | 3      |

GAIL M KEMPLER  
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Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

MATTHEW LA VAIL; San Francisco, CA;  
Roy H. Steinberg, San Francisco, CA; and  
George D. Yancopoulos, Yorktown Heights, NY - -

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TITLE

PREVENTION OF RETINAL INJURY AND DEGENERATION BY SPECIFIC FACTORS

PRELIMINARY CLASS: 514

-- This application claims benefit from US6N 08/334,859  
filed November 4, 1994 and issued as U.S. Patent No. 5,667,968  
which is a continuation of US6N 07/836,090 filed February  
14, 1992 which is a continuation-in-part of US6N 07/570,657  
filed August 20, 1990 and issued as U.S. Patent No. 5,229,500  
which is a continuation-in-part of US6N 07/400,591 filed  
on August 20, 1989 and issued as U.S. Patent No. 5,180,820. --